

**CalOMS Implementation Workgroup  
Treatment Sub-Group**

**Outcome Questions as Modified at May 12, 2004 Treatment Sub-Group Meeting**

<b>Life Domains</b>	<b>Question</b>
<b>Alcohol/Drug Use</b>	
	What is the frequency of alcohol use in past 30 days?
	What is the frequency of other drug use (highest frequency of any drug reported) in past 30 days?
	What is your secondary alcohol or drug problem?
	How often did you use this alcohol or drug in the past 30 days?
	How many days have you injected drugs in the past 30 days?
<b>Employment</b>	
	What is your current employment status?
	How many days were you paid for working in the past 30 days?
	Are you currently enrolled in school?
	Are you currently enrolled in a job training program?
<b>Legal</b>	
	How many times have you been arrested in the past 30 days?
	How many days have you been in jail in the past 30 days?
	How many days have you been in prison in the past 30 days?
<b>Medical</b>	
	How many times have you visited an emergency room in the past 30 days?
	How many days have you stayed overnight for medical problems in a hospital in the past 30 days?
	How many days have you experienced medical problems in the past 30 days?
	Have you been diagnosed with the following diseases: <div style="display: flex; justify-content: space-between;"> <span>- TB?</span> <span>- Sexually transmitted diseases?</span> </div> <div style="display: flex; justify-content: space-between;"> <span>- Hepatitis C?</span> <span>- Other communicable diseases?</span> </div>
<b>Psychiatric</b>	
	How many days have you stayed overnight in a hospital for psychiatric problems in the past 30 days?
	How many days in past 30 have you experienced psychological or emotional problems?
	Have you had a significant period of time in the past 30 days in which you experienced serious thoughts of suicide?
	Have you ever been diagnosed with a mental illness?
<b>Family/Social</b>	
	What are your current living arrangements? <div style="display: flex; justify-content: space-between;"> <span>- Independent</span> <span>- Dependent</span> </div> <span>- Homeless</span>
	How many days in the past 30 have you lived with someone who had an alcohol or drug problem?
	How many days in past 30 have you had serious conflicts with your family?
	How many children do you have aged 17 or less (birth or adopted) – whether they live with you or not?
	How many of the children you have are aged 5 or less?
	How many of your children are living with someone else because of a child protection court order?
	How many days in the last 30 days have you participated in social support recovery activities (such as, 12-Step meetings; religious/faith recovery groups; other self-help meetings; interactions with family members and/or friends supportive of recovery; attending meetings of other social support recovery organizations other than those listed above)